

City of Carlsbad
Cultural Arts Office

Community Arts Grant Funding Programs
APPLICATION FORM

Section 1: Summary Information

Applicant/sponsor name & address

☐ Sponsored project

For whom?

☐ Individual?

Project/activity title

Start Date

End Date

Community Arts Grant Funding Programs

☐ Arts Projects

☐ Arts In Schools

☐ Arts Opportunities

Primary Artistic Discipline – Select all that apply

☐ Dance

☐ Literature

☐ Film/Media Arts

☐ Multidisciplinary

☐ Music

☐ Opera/Musical Theatre

☐ Theatre/Performance Art

☐ Visual Arts/Public Art

Project Summary: Please describe the project for which you are requesting funds in the space provided.

Applicant(s) is/are requesting \$_____ in Community Arts grant Program funding to/for...

For CAO staff use only

Arts Commission Review _____

Award Amount \$ _____

☐ App Forms

☐ Narrative

☐ Itemization

☐ Financial Statements

☐ Certification Signature

☐ Assurance Compliance

☐ Board List

☐ Documentation

New Applicant?

☐ Y ☐ N

Tax Exempt?

☐ Y ☐ N

Section 2: Applicant(s) / Project Information		
Applicant		
Applicant's Legal Name	Federal Tax I.D. Number	Other Common Name
Official Mailing Address		City State Zip
Telephone	Fax	Website (URL)
Applicant or Primary Partner Contact/Project Director		Title
Address		City State Zip
Telephone	Fax	Email
Sponsored or Other Partner Contact/Project Director		Website (URL)
Address		City State Zip
Telephone	Fax	Email
Board Chair		Title
Address		City State Zip
Telephone	Fax	Email
Project		
Applicant Race Code	Sponsored Race Code	Project Race Code
Total Number of Artists Participating	Total Amount Paid to Artists \$	
Total Number of Carlsbad/SD Co. Artists Participating	Total Amount Paid to Carlsbad/SD Co Artists \$	
Total Number of Individuals Benefiting	Total Number of Youth Benefiting	

Section 3: Organizational Budget History – (Arts organization or sponsored group information)				
	2011-2012 Actual	2012-2013 Actual	2013-2014 Projected	2014-2015 Proposed
Revenue				
Expenses				

Section 4: City of Carlsbad Funding History - (Arts organization or sponsored group information)			
	2011-2012		2012-2013
City of Carlsbad Funding	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was this project funded previously under a different organization name or sponsor?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes,	Year:	Name:	

Section 5: Projected Budget Information			
The budget must balance. Total income (line 10c) must equal total expenses (line 17). Round all budget figures to the nearest whole dollar. In-kind is allowed only in the Capacity Building Program.			
PROJECT INCOME	CASH	IN-KIND	TOTAL
EARNED INCOME			
1. Total Admissions			
2. Total Other Earned Income			
3. TOTAL EARNED INCOME (Add Lines 1 and 2)			
UNEARNED INCOME			
4. Total Private Support (Corp, Foundation, Individual)			
5. Total Public Support (Government Grants)			
6. Total Other Unearned Income			
7. Applicant Cash			
8. TOTAL UNEARNED INCOME (Add Lines 4 – 7)			
9. COC Request Amount			
10 a. TOTAL CASH INCOME (Add Lines 3, 8, and 9)			
10 b. TOTAL IN-KIND SUPPORT (must equal In-Kind Line 17)			
10 c. TOTAL INCOME (Add Lines 10a and 10b)			

PROJECT EXPENSES	CASH	IN-KIND	TOTAL
11. Total Employee Costs			
12. Total Non-Employee Costs			
13. Space Rental			
14. Travel			
15. Marketing, Promotion, Publicity			
16. Total Other Expenses			
17. TOTAL EXPENSES (Add Lines 11-16, must equal Lines 10 a, b, and c)			

Section 6: Application Checklist

All sections of the application form must be completed and signed by the appropriate representative(s). Check the boxes below to ensure all sections have been completed.

Application Form

- ☐ Section 1 Summary Information
- ☐ Section 2 Applicant/Project Information
- ☐ Section 3 Organizational Budget History
- ☐ Section 4 CoC Funding History
- ☐ Section 5 Projected Budget Information
- ☐ Section 6 Application Checklist
- ☐ Section 7 Certification (signed by A.O.)

Required Attachments:

- ☐ Attachment 1 Narrative
- ☐ Attachment 2 Budget Itemization
- ☐ Attachment 3 Assurance of Compliance Form
- ☐ Attachment 4 Financial Statements
- ☐ Attachment 5 Board List
- ☐ Attachment 6 DOCUMENTATION (if available)
- ☐ Attachment 8 Proof of Tax Exempt (if required)

PACKAGING - Submit one envelope with the application and all required attachments.

Mailing and Delivery Instructions

Applications must be hand delivered or mailed.

Hand delivered applications must be in the Cultural Arts Office by 4 P.M. the day of the deadline.

The Cultural Arts Office is not responsible for loss or damage of application materials. The City of Carlsbad Community Arts Grant Funding Programs reserves the right to retain a copy of application materials for archival purposes and its permanent record. All application materials are public records. Keep a complete copy of your application for your file.

Section 7: Certification

Applicant(s) certifies the information contained in this application, including all attachments and support materials, is true and correct to the best of our knowledge. If payment is to be made to anyone other than the grantee, it is understood that the grantee is financially, administratively, and programmatically responsible for all aspects of the grant and that all reports must be submitted through the grantee.

The applicant further agrees that if award is made:

1. funds will be administered and accounted for by the applicant and used for the specific purposes outlined in the application and agreement;
2. funds received under this program will not be used to supplant funds normally budgeted for same and the funds received will be used solely for the services or activities herein described;
3. the applicant will conform to the Cultural Arts Office Community Arts Grants Funding Programs guidelines;
4. proof of ADA compliance of project facility(ies) will be provided, if required, prior to undertaking the services or activities described;
5. the applicant will provide proof of insurance, if required, prior to undertaking the services or activities described;
6. the applicant will submit revised budget information, documentation, and reports as required;
7. the applicant will comply with the Cultural Arts Office requirements for the Community Arts Grant Funding Programs, as required;
8. this application and agreement by the undersigned individual has been duly approved by the governing board of the applicant organization and agreed to by all parties.

*Please provide **BLUE INK** signatures on all original application forms*

Applicant Authorized Official

**Project Director/Partner Artist
(if applicable)**

**Sponsored Group/Individual
(if applicable)**

signature

date

signature

date

signature

date

name (typed)

title

name (typed)

title

name (typed)

title

Attachment 3 – Assurance of Compliance Form

Organization's name: _____

_____(hereafter, called the “Applicant” hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973 and Title IX of the Education Amendment of 1972. Title VI of the Civil Rights Act of 1964 provides that no person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity receiving federal financial assistance. Section 504 of the Rehabilitation Act of 1973 provides for nondiscrimination in federally assisted programs on the basis of handicap. Subject to certain exception, Title IX of the Education Amendments of 1972 prohibits exclusion of persons on the basis of sex from any education program or activity receiving federally financial assistance.

Title VI, Section 504, and Title IX prohibit discrimination on the basis of race, color, national origin, handicap or sex in any program or activity receiving City of Carlsbad Cultural Arts Office support. The Applicant hereby gives assurance that it immediately will take any measure necessary to comply.

This Assurance shall obligate the Applicant for the period during which the financial assistance is extended. This Assurance is given in connection with any and all financial assistance from the Cultural Arts Office/City of Carlsbad after the date this form is signed. This includes payments after such date for financial assistance approved before such date. The applicant recognizes and agrees that any such assistance will be extended in reliance on the representations and agreements made in this Assurance and that the City of Carlsbad shall have the right to seek judicial enforcement of this Assurance. This Assurance is binding on the Applicant, its successors, transferees, and assignees, and on the authorized official whose signature appears below.

Applicant (Organization name)

*Please provide **blue ink** signatures on all original application forms.*

By (Signature of Board President, Chair or Executive Director) Title

Date